

OMB No. 2000-0138 EPA Form 8900-1 FMC Corp 16 | Md. MI

- '	Waste Guantity:	Facility Type	Total Facility Waste Amount
	Place an X in the appropriate boxes to	1. □ Piles	Co. The same T
•	indicate the facility types found at the site.	2. Land Treatment	
	In the "total facility waste amount" space give the estanced combined quantity	3. 🗆 Landfill 4. 🗅 Tanks	gallons 70
	(volume) of nazardous wastes at the site using cubic feet or gallons.	, 5. 🗆 Impoundment	Total Facility Area square feet See Item I
	In the "total facility area" space, give the	6. Underground Injection	· · · · · · · · · · · · · · · · · · ·
	estimated area size which the facilities occupy using square feet or acres.	7. Drums, Above Ground 8 Drums, Below Ground	- Scres
		9. 胃 Other (Specify) Pits	
3	Known, Suspected or Likely Releases	to the Environment:	
	Place an X in the appropriate boxes to indica or likely releases of wastes to the environment		Known Suspected DLikely None
• .	Note: Items Hand I are optional. Completin hazardous waste sites. Although completing	ng these items will assist EPA and State and ng the items is not required, you are encoura	local governments in locating and assessing ged to do so.
H	Sketch Map of Site Location: (Option	al) V	
	Sketch a map showing streets, highways, routes or other prominent landmarks near		
	the site. Place an X on the map to indicate the site location. Draw an arrow showing		
,	the direction north. You may substitute a publishing map showing the site location.		
(permaning map anowing the site location;		ORIGINAL (Red)
		See Attachment I	- madeline
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].	Description of Site: (Optional)		
	Describe the history and present		
	conditions of the site. Give directions to the site and describe any nearby wells,		
	rings, lakes, or housing. Include such brmation as how waste was disposed		
	and where the waste came from. Provide any other information or comments which		
	may help describe the site conditions.	See Attachment II	
	•		
J	Signature and Title:		
	The person or authorized representative (such as plant managers, superintendents,	Name E. W. Wayland	S Owner, Present
	trustees or attorneys) of persons required to notify must sign the form and provide a	Stroot 1701 E. Patapsco Avenu	Owner, Past
	mailing address (if different than address in item A). For other persons providing		Operator Present
	notification, the signature is optional. Check the boxes which best describe the	City Baltimore, State MD	Zip Code 21226
'.' '	relationship to the site of the person	8 A Warley	Other
	required to notify. If you are not required to notify check "Other".	Supraturo C /V / Yangton	Date C/ YVI